

## **Assembly Bill No. 2385**

### **CHAPTER 679**

An act to add and repeal Article 3.7 (commencing with Section 78265) of Chapter 2 of Part 48 of Division 7 of Title 3 of the Education Code, relating to public postsecondary education.

[Approved by Governor September 30, 2010. Filed with  
Secretary of State September 30, 2010.]

#### **LEGISLATIVE COUNSEL'S DIGEST**

AB 2385, John A. Pérez. Pilot Program for Innovative Nursing and Allied Health Care Profession Education at the California Community Colleges.

Existing law establishes the California Community Colleges, under the administration of the Board of Governors of the California Community Colleges, as one of the segments of public postsecondary education in this state. Existing law establishes community college districts, each of which is administered by a governing board, throughout the state, and authorizes these districts to provide instruction to students at the community college campuses maintained by the districts.

The bill would establish the Pilot Program for Innovative Nursing and Allied Health Care Profession Education at the California Community Colleges under the administration of the Office of the Chancellor of the California Community Colleges to facilitate the graduation of community college nursing and allied health students by piloting innovative models to expand the state's capacity to prepare a qualified health care workforce. The bill would require the chancellor's office to establish the pilot program at up to 5 campuses throughout the state according to specified requirements.

The bill would express legislative intent that the pilot program be funded with a combination of state apportionment funding, federal grants, employer-based partnerships, and private philanthropic resources.

The bill would require the chancellor's office to collect appropriate data for the purpose of evaluating the effectiveness of the pilot program. The bill would require the chancellor's office to analyze this data, and contract with an external evaluator to conduct an independent evaluation, with findings and recommendations with respect to the pilot program to be reported to the Legislature on or before January 1, 2017.

The bill would provide that its provisions would be implemented in any fiscal year only to the extent that the chancellor's office determines that sufficient moneys are available to administer the program.

The bill would provide that the pilot program would become inoperative on July 1, 2017, and as of January 1, 2018, would be repealed.

*The people of the State of California do enact as follows:*

SECTION 1. The Legislature finds and declares all of the following:

(a) Allied health care occupations are expected to grow dramatically in the next decade, and California labor market data show that, by 2017, allied health care occupations are projected to account for more than 1,100,000 jobs around the state, an increase of close to 130,000 jobs, or 13 percent, from 2007.

(b) Health care industry experts project a growing demand for care due to burgeoning population growth and an aging population. Retirements by health care employees will place additional strain on a system struggling to train the number of qualified individuals necessary to meet the demands of the health care industry.

(c) Although one of the most publicized shortage areas has been registered nurses, a wide variety of allied health care occupations also face worker shortages.

(d) The California Community Colleges system currently trains approximately 70 percent of registered nurses statewide, offering educational programs in a variety of allied health care professions.

(e) Allied health care profession education programs are among the most costly education programs offered by community colleges and colleges have been forced by fiscal constraints to limit their enrollment capacity.

(f) Currently, most associate degree nursing and allied health care profession courses are offered over four semesters or two school years, and require the completion of 70 units in program courses, assuming that the student has met all of the prerequisite requirements and is ready to start the program immediately.

(g) The goal of this bill is to pilot innovative program delivery and curriculum models to enable more students to earn their degrees and expand the state's capacity to train a qualified health care workforce without compromising the integrity of program and licensure requirements.

(h) Successful program models would be a center of innovation and a foundation for the newest educational technology and curricular ideas.

(i) The enactment of the federal American Recovery and Reinvestment Act of 2009 (Public Law 111-5) and the federal Patient Protection and Affordable Care Act (Public Law 111-148) provided opportunities for California to address critical health care workforce shortages.

SEC. 2. Article 3.7 (commencing with Section 78265) is added to Chapter 2 of Part 48 of Division 7 of Title 3 of the Education Code, to read:

Article 3.7. Pilot Program for Innovative Nursing and Allied Health Care  
Profession Education at the California Community Colleges

78265. (a) The Pilot Program for Innovative Nursing and Allied Health Care Profession Education at the California Community Colleges is hereby established under the administration of the Office of the Chancellor of the

California Community Colleges. The goal of the pilot program shall be to facilitate the graduation of community college nursing and allied health students by piloting innovative models to expand the state's capacity to prepare a qualified health care workforce.

(b) The chancellor's office shall establish the pilot program at up to five campuses throughout the state.

(c) The pilot programs shall test innovative program delivery models to expand the capacity of community colleges to offer health care training to students in occupations for which there is a substantial labor market demand. Pilot programs shall test health care education models that use tools such as technology and flexible scheduling, and shall coordinate student services and financial assistance to the maximum extent possible in order to facilitate a student's successful program completion.

(d) The chancellor's office shall pursue a variety of funding sources to help support the development and delivery of the pilot programs and create high-quality curriculum delivery models to be used in health care certificate and degree programs. These funding sources shall include, but not be limited to, federal grants, philanthropic funds, employer monetary and in-kind contributions, and state and federal workforce funds.

(e) The chancellor's office, contingent upon obtaining resources to support the development and delivery of the pilot programs, shall develop a request for application for community colleges to participate in the pilot program commencing on or after the 2011–12 academic year. The chancellor's office shall develop the request for application in collaboration with representatives from education, labor, health care employers, licensing and credentialing entities, regional occupational centers and programs, hospitals and nursing organizations, and other appropriate entities. The chancellor's office shall specify the amount of baseline funding provided for each pilot program based upon funding sources developed pursuant to subdivision (d). Pilot programs shall be in high-demand allied health care or nursing programs.

(f) The chancellor's office shall select pilot programs that do all of the following:

(1) Provide students with an industry-recognized certificate or degree in health care fields for which there is a demonstrated shortage of workers in the labor market and documented support from employers.

(2) Demonstrate a capacity to train specified health care workers, or the ability to sustain or expand current innovative health care education and training programs, or both. Limited capacity may be demonstrated by waiting lists to enter existing community college allied health care or nursing programs.

(3) Provide evidence of sufficient clinical sites for offering the pilot program.

(4) Include high-quality curriculum delivery models as part of the pilot program. All courses shall meet the curriculum standards approved by the appropriate state licensing entities that oversee each health occupation, and shall not in any way shorten the clinical units or hours as determined by the appropriate state licensing entities that oversee each health occupation.

Curriculum already approved by the appropriate state licensing entities that oversee each health occupation shall be deemed to satisfy the requirements of this paragraph.

(5) Provide flexibility in the delivery of coursework, including, but not limited to, intensive weekend, evening, and summer courses to enable students to efficiently complete program requirements.

(6) Offer coordinated supportive services to students, including, but not limited to, tutoring and financial advising.

(7) Demonstrate clear, nonduplicative, and articulated education pathways with local secondary and postsecondary education entities.

(8) Identify resources to support the pilot program, including, but not limited to, funding provided by the chancellor's office obtained from outside sources for the support of the pilot program, local workforce investment funding, and locally provided employer or philanthropic resources.

(g) The chancellor's office shall select, to the extent possible, pilot programs that are geographically distributed throughout the state.

(h) In selecting the pilot programs, the chancellor's office may give consideration to existing innovative programs currently underway within the community college system that require additional resources to move to scale.

78265.1. As used in this article the following definitions apply:

(a) "Chancellor's office" means the Office of the Chancellor of the California Community Colleges.

(b) "Pilot program" means the Pilot Program for Innovative Nursing and Allied Health Care Profession Education at the California Community Colleges established by Section 78265.

78265.2. (a) It is the intent of the Legislature that the pilot program attract and admit a diverse and talented pool of students likely to succeed in an innovative program model setting.

(b) To effectuate the legislative intent expressed in subdivision (a), both of the following shall occur:

(1) In selecting students for admission to the pilot program, participating campuses may use a diagnostic assessment tool identified by the chancellor's office pursuant to Section 78261. The use of a diagnostic assessment tool by a participating campus shall be part of a comprehensive program-based support system for students who need skills enhancement prior to entering the program. When the number of applicants for the pilot program exceeds the capacity to admit students, a participating campus may do either of the following when that process is deemed feasible:

(A) Administer the multicriteria screening process established under Section 78261.5.

(B) Give preference to students who have participated in a health science pathway program, including, but not limited to, a California Partnership Health Science and Medical Technology Academy, or a Career Advancement Academy.

(2) Participating campuses shall provide support services to help students complete the pilot program. These support services shall include, but not

necessarily be limited to, the presence of student success advisers, tutors, mentors, appropriate financial assistance, and aid in placing students who complete the program in appropriate internships.

78265.3. It is the intent of the Legislature that the pilot program be funded with a combination of state apportionment funding, employer-based partnerships, federal grants, and private philanthropic resources.

78265.4. The chancellor's office shall collect appropriate data for the purpose of evaluating the effectiveness of the pilot program. The chancellor's office shall analyze this data, and contract with an external evaluator to conduct an independent evaluation, with findings and recommendations with respect to the pilot program to be reported to the Legislature on or before January 1, 2017.

78265.5. This article shall be implemented in any fiscal year only to the extent that the chancellor's office determines that sufficient moneys are available to administer the program.

78265.6. This article shall become inoperative on July 1, 2017, and, as of January 1, 2018, is repealed, unless a later enacted statute, that becomes operative on or before January 1, 2018, deletes or extends the dates on which it becomes inoperative and is repealed.